

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2000

Application or Docket Number

09941936

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	52	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	52 minus 20 =	32
INDEPENDENT CLAIMS	5 minus 3 =	2
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

SMALL ENTITY  
TYPE

OTHER THAN  
OR. SMALL ENTITY

RATE	FEES
BASIC FEE	355.00
X\$ 9-	
X40-	
+135-	
TOTAL	

RATE	FEES
BASIC FEE	710.00
X\$18-	
X80-	
+270-	
TOTAL	

If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	INCREASE NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	35	Minus	22 = 0
Independent	5	Minus	5 = 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY

OTHER THAN  
SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9-	
X40-	
+135-	
TOTAL ADDT. FEE	

RATE	ADDITIONAL FEE
X\$18-	
X80-	
+270-	
TOTAL ADDT. FEE	

6/10/04

(Column 1) (Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	INCREASE NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	12	Minus	30 = 18
Independent	4	Minus	5 = 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X\$ 9-	
X40-	
+135-	
TOTAL ADDT. FEE	

RATE	ADDITIONAL FEE
X\$18-	
X80-	
+270-	
TOTAL ADDT. FEE	

(Column 1)

(Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	INCREASE NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	12	Minus	30 = 18
Independent	4	Minus	5 = 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X\$ 9-	
X40-	
+135-	
TOTAL ADDT. FEE	

RATE	ADDITIONAL FEE
X\$18-	
X80-	
+270-	
TOTAL ADDT. FEE	

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the entry "Number Previously Paid For" in THIS SPACE is less than 20, enter "20".

If the entry "Number Previously Paid For" in THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FAX 703-202-1070  
(Area Code)

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